## **Conflict of Interest and Fair Access Survey**

I.	General Information
CRADA	Title
CRADA	ID Number NIH/ICD
NIH/PI _	
Collabor	rating Organization(s)
II.	Financial Interest Statement (Use attachments if necessary)
include control t not roya	cial interest" is any interest of monetary value, including a financial interest of a spouse or dependent child. Also, it may the financial interest of a member of your household or a former employee. There is no minimum amount of value or hat constitutes a financial interest. Normally, financial interest includes, salaries, stocks, or consultant agreements builties from government inventions processed through the Federal Technology Transfer Act. A financial interest also any agreement, such as a license, with an entity for commercialization of patent rights held in a personal capacity.
child(rer	explain fully any financial interest in the collaborating organization(s) held by you, your spouse, your dependen n), any other member of your household or a former employer of less than one year. If no such interests exist, please statement to that effect.
have an	explain fully any financial interest in the collaborating organization(s) held by an entity in which you or your spouse official duty, such as serving as an officer, director, trustee, partner or employee. If no such interests exist, please statement to that effect.
prospec	explain fully any financial interest in the collaborating organization(s) held by an entity in which you are negotiating for tive employment, or with which you have an arrangement for prospective employment. If no such interests exist, nake a statement to that effect.
approve	the above situations apply, has a waiver of the conflict (pursuant to 18 U.S.C. Section 208) or other resolution been d by your Institute and ICD Deputy Ethics Counselor after consultation with the Office of the Special Counsel of Please attach an approved waiver or resolution before submitting your CRADA to the CRADA Subcommittee.
III.	Appearance of Conflict of Interest Statement (Use attachments if necessary)
title to U	explain any personal interest in technology that is the subject of or closely related to this CRADA, including persona JS or foreign patent rights. In your explanation, please identify any relationships with outside parties related to the ogy. If no such interests exist, please make a statement to that effect.
informal	describe any present or past working relationship with the collaborator, including paid or unpaid outside activities, collaborations, speaking engagements, any past work affiliation or licensing arrangements for personally held patent no such relationships exist, please make a statement to that effect.

If any of your relatives are employed by the proposed collaborator, please describe that employment, detailing family relationship, place of employment, position, etc. If no such employment exists, please make a statement to

Please describe any of your duties within your ICD that involve grant or contract management responsibilities, including oversight, approval, advising or initiating actions on ICD funded grants or contracts. If no such duties exist, please make a

that effect.

When did any past working relationship end?

statement to that effect.

## IV. Collaborator Selection (Use attachments if necessary)

Approximately when did you begin negotiating this CRADA with the proposed collaborator?

If you or anyone else in your laboratory has had any past CRADAs or has any present CRADAs with the collaborator indicate below. If none, indicate "None".					
CRADA Title	ID NUMBER	Period of Collaborator			
Please explain the reason for selecting the collaborations, unique technology, unique e licensed to the collaborator or any other issues	xpertise, unique materials or equipr	ment, unique facilities, government inventions			
If it was announced publicly, where was the	proposed CRADA project advertise	ed? Were there responses?			
V. Principal Investigator's Certification	tion				
BECAUSE THE PATENT RIGHTS TO CRAINTRAMURAL INVENTIONS, I ACKNOWLE		SED UNDER THE CRADA RATHER THAN AS OLLABORATORS ON THIS PROJECT IN			

I certify that, to the best of my knowledge, all of the above information is true and accurate.

HOW JOINT INVENTIONS MADE WITH ME WILL BE LICENSED.

NIH Principal Investigator's Signature:	
	Date

## VI. Ethics Officer's Certification

Based on my review of the information presented in Sections II and III above, there are no real or apparent conflict of interest issues for this CRADA.

OTHER NIH LABORATORIES KNOW ABOUT THE EXISTENCE OF MY CRADA BECAUSE IT MAY HAVE AN IMPACT ON

ICD Deputy Ethics Counselor's Signature:	
	Date

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